

LEGISLATIVE FISCAL OFFICE Streamlining Commission Analysis

Recommendation No. **RECOMMENDATION** 72

Author:

Streamlining Draft AGE

AGEDNES

18

Date: January 21, 2010

Dept./Agy.: Juvenile Justice

Subject: Behavioral Health of High Risk Children

2:07 PM

Analyst: Matthew LaBruyere

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Perform a systemwide analysis of behavioral health needs of high risk children within the child welfare and OJJ systems to maximize the use of Medicaid funding.

Proposed recommendation by the Commission on Streamlining Government calls for a systemwide analysis of behavioral health needs of high risk children within the child welfare and OJJ systems to maximize the use of Medicaid funding. Such analysis shall be performed in-house by state employees.

EXPENDITURES	2010-11	2011-12	2012-13	2013-14	2014-15	5 -YEAR TOTAL
State Gen. Fd.	SEE BELOW					
Agy. Self-Gen.	\$0	\$0	\$0	\$0	\$0	\$0
Ded./Other	\$0	\$0	\$0	\$0	\$0	\$0
Federal Funds	SEE BELOW					
Local Funds	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>
Annual Total	\$0	\$0	\$0	\$0	\$0	\$0
REVENUES	2010-11	2011-12	2012-13	2013-14	2014-15	5 -YEAR TOTAL
State Gen. Fd.	\$0	\$0	\$0	\$0	\$0	\$0
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Agy. Self-Gen.	\$0	\$0	\$0	\$0	\$0	\$0
	\$0 \$0	\$0 \$0	\$0 \$0			
Ded./Other	·			\$0	\$0	\$0
Agy. Self-Gen. Ded./Other Federal Funds Local Funds	\$0	\$0	\$0	\$0 \$0	\$0 \$0	\$0

EXPENDITURE EXPLANATION

The proposed recommendation is currently being discussed by the Department of Health and Hospitals (DHH), the Department of Social Services (DSS), and the Office of Juvenile Justice (OJJ). The agencies are in the process of designing a coordinated care system for at-risk juveniles to prevent them from entering the juvenile justice system. However, it is unknown whether a net cost or savings based on this recommendation will be recognized until a specific finance and programmatic model is finalized.

The coordinated system of care will provide a network of community-based services and supports that are organized to meet the challenges of children and youth with behavioral health needs and their families. These services will be provided by state agencies and organizations contracted by the agencies to provide the needed services. Currently, OJJ and DSS provide or contract to provide day treatment, individual/family counseling, family preservation services, one-to-one staffing, prevention/diversion services, and residential treatment. In addition to these current services, the new system of care will likely provide assessment and diagnosis, medical management, day treatment, and inpatient services, as well as explore cost effective methods to purchase therapeutic foster care, residential services and treatment, therapeutic group care, transportation, and education and support.

The coordinated system of care will attempt to leverage federal Medicaid dollars through a Medicaid waiver to pay for the current behavioral health services offered, which are currently funded with 100% state general fund. If a waiver is allowed, a savings will be recognized due to the leveraging of federal dollars to replace state general fund dollars. Additionally, any new services proposed to be offered under the coordinated system of care will be requested to be covered under the waiver. If a waiver is not allowed by the Federal government, then any new services would be funded with 100% SGF. Regardless of whether a waiver is allowed or not, new services will result in an increase in SGF expenditures. The impact is unknown since services and population remain unknown.

(Continued on Page 2)

REVENUE EXPLANATION

There is no anticipated direct material effect on governmental revenues as a result of this measure.

Senate <u>Dual Referral Rules</u> 13.5.1 >= \$500,000 Annual Fiscal Cost	House $\boxed{ 6.8(F) >= $500,000 \text{ Annual Fiscal Cost} }$	H. Hordon Mark
13.5.2 >= \$500,000 Annual Tax or Fee Change		H. Gordon Monk Legislative Fiscal Officer



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CONTINUED EXPLANATION from page one:

Savings under the proposed coordinated system of care could be recognized through OJJ in a cost avoidance from youth not entering the juvenile justice system after receiving the proper services and/or savings could be recognized in a more efficient delivery of other ongoing services.

At the present time there are many unknowns associated with the coordinated system of care. The agencies will be meeting over the coming months to determine the target population, a state program model through several other state models, and a financial model. When a program model and target population are agreed upon, Mercer will provide actuarial analysis to determine the likely cost/savings of the coordinated system of care.

Senate <u>Dual Referral Rules</u>

13.5.1 >= \$500,000 Annual Fiscal Cost

13.5.2 >= \$500,000 Annual Tax or Fee Change

 $\frac{\text{House}}{\boxed{ }} 6.8(\text{F}) >= $500,000 \text{ Annual Fiscal Cost}$

6.8(G) >= \$500,000 Tax or Fee Increase or a Net Fee Decrease

H. Gordon Monk

Legislative Fiscal Officer